Fill in thi	s information to identify your case:								
				eck on 2A-1Su		irected in this form an	d in Form		
Debtor 1	Trina Elizabeth Hobbs								
Debtor 2 (Spouse, if				■ 1. T	here is no pres	umption of abuse			
	tates Bankruptcy Court for the: Western District o	f Michigan		\square 2. The calculation to determine if a presumption of abuse					
Officed 5	tates Bankruptey Court for the. Western District o	wiichigan				nade under <i>Chapter 7</i> icial Form 122A-2).	Means Test		
Case nu	mber 18-00400	,		,	•				
(ii Kilowii)						does not apply now by service but it could a			
				□ Ch	eck if this is a	n amended filing			
Officia	al Form 122A - 1								
Chap	ter 7 Statement of Your Cur	rent Mor	nthly Inc	ome	е		12/15		
attach a s case num qualifying Part 1:	plete and accurate as possible. If two married people a eparate sheet to this form. Include the line number to w per (if known). If you believe that you are exempted fro military service, complete and file Statement of Exemp Calculate Your Current Monthly Income	rhich the addition m a presumption ption from Presum	nal information a of abuse becau	applies. se you	On the top of aid on the top of aid on the top of aid on the top of the top o	ny additional pages, wr narily consumer debts	ite your name and or because of		
	at is your marital and filing status? Check one or	ıly.							
	Not married. Fill out Column A, lines 2-11.								
_	Married and your spouse is filing with you. Fill ou		•	2-11.					
_	Married and your spouse is NOT filing with you.	•	•						
_	☐ Living in the same household and are not lega								
	Living separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evadir	egally separated	d under nonban	kruptc	y law that applic	es or that you and you			
101(10 the 6 n	the average monthly income that you received from all A). For example, if you are filing on September 15, the 6-m the income for all 6 months and divide the total is own the same rental property, put the income from that p	onth period would by 6. Fill in the res	be March 1 throsult. Do not include	ugh Aug de any i	just 31. If the amo	ount of your monthly incomore than once. For exam	me varied during ple, if both		
				Colun		Column B Debtor 2 or non-filing spouse			
	ir gross wages, salary, tips, bonuses, overtime, roll deductions).	and commission	ons (before all	\$	3,617.50	\$			
	Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.				100.00	\$			
of y from and	amounts from any source which are regularly part ou or your dependents, including child support in an unmarried partner, members of your household roommates. Include regular contributions from a spid in. Do not include payments you listed on line 3.	Include regular I, your depender	contributions nts, parents,	\$	0.00	\$			
	income from operating a business, profession,	or farm				· <u></u>			
		Deb	otor 1						
Gro	ss receipts (before all deductions)	\$ 0.00							
	inary and necessary operating expenses	-\$ 0.00	0	•	0.00	•			
	monthly income from a business, profession, or far	n \$	Copy here ->	\$	0.00	\$			
6. Ne t	income from rental and other real property	Deh	otor 1						
Gro	ss receipts (before all deductions)	\$ 0.00							
	inary and necessary operating expenses	-\$ 0.00							
	monthly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$			
	erest, dividends, and royalties	·		\$	0.00	\$			

Official Form 122A-1

Case number (if known) 18-00400

						Column A Debtor 1		Column B Debtor 2 o		e
8. U r	nemployment compensa	ation				\$	0.00	\$	•	
	o not enter the amount if ye Social Security Act. Inst		nount received was	s a benefi	t under					_
	For you		\$	636.0	00_					
	For your spouse		\$							
9. Pe	ension or retirement inc nefit under the Social Se	ome. Do not include an	y amount received	that was	s a	\$	0.00	\$		_
Do red do	come from all other sound not include any benefits beived as a victim of a warmestic terrorism. If necessal below.	received under the Sour crime, a crime agains	cial Security Act or t humanity, or inte	payment rnational	is or					
	Unemployment	Benefits				\$	543.00	\$		_
						\$	0.00	\$		_
	Total amounts from	n separate pages, if any	/.		+	\$	0.00	\$		<u></u>
	ilculate your total curre ch column. Then add the				\$	4,260.50	+ \$		= \$_	4,260.50
Part 2:	Determine Whether	the Means Test Appl	ies to You							tal current monthly ome
12. C a	lculate your current mo	onthly income for the	year. Follow these	steps:						
12	a. Copy your total curren	t monthly income from I	ine 11			Сор	y line 11 h	nere=>	\$_	4,260.50
	Multiply by 12 (the nur	nber of months in a yea	ır)							12
12	b. The result is your annu	ual income for this part	of the form					12b	o. \$_	51,126.00
13. C a	lculate the median fam	ily income that applies	s to you. Follow th	nese step	s:					
Fil	I in the state in which you	live.	MI							
Fil	I in the number of people	in your household.	2							
To	Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.							\$_	59,541.00	
14. H c	ow do the lines compare	?								
14	a. Line 12b is les Go to Part 3.	s than or equal to line 1	3. On the top of pa	age 1, ch	eck box	1, There is	no presum	ption of abus	se.	
14	b. Line 12b is mo	re than line 13. On the and fill out Form 122A-2.	top of page 1, che	ck box 2,	The pr	esumption o	f abuse is	determined b	y Forn	122A-2.
Part 3:	Sign Below									
	By signing here, I decl	are under penalty of pe	rjury that the inforr	nation or	this sta	atement and	in any atta	achments is t	rue an	d correct.
	X /s/ Trina Elizabet	h Hobbs					·			
	Trina Elizabeth I Signature of Debtor									
D	Pate February 1, 2018 MM / DD / YYYY	3								
	If you checked line 14a	a, do NOT fill out or file	Form 122A-2.							
	If you checked line 14l	o, fill out Form 122A-2 a	and file it with this f	orm.						

Trina Elizabeth Hobbs

Debtor 1